

AUG 23 2019

2:19-cv-00617

To the Honorable Judge Johnston 8-20-19

RORY L. PERRY II, CLERK
U.S. District Court
Southern District of West Virginia

Your Honor sir im writing you because i need help. I came to the Gilmer camp on June 2nd of this year and was put on the top bunk, and the medical staff knew i have had a bottom bunk pass and all my paper work shows thats true. I fell climbing the ladder and hurt myself which the paperwork shows and i saw the Dr. that works here and told him shortly after i got here that i was on the top bunk and he told me that he would take care of that and have me moved. After i fell and the ambulance took me to the hospital i came back and the staff never moved me and this happened on Saterday the 17th of this month and im still on the top bunk and i have a bad head injury and my neck and back hurts as well as my shoulder etc. I sent you this paper work to prove im telling the truth, and to see if you will appoint me a lawyer to file a civil lawsuit against the BOP and the medical staff here at the Gilmer camp if its possible please let me know thank you.

Sincerely

Michael Fortuna.

11027-089

TRULINCS 11027088 - FORTUNA, MICHAEL RAY - Unit: GIL-Q-A

FROM: Health Services
TO: 11027088
SUBJECT: RE:***Inmate to Staff Message***
DATE: 06/27/2019 10:42:02 AM

At this time, you have the restrictions of "sedentary work only, no prolonged standing and no upper bunk". Most likely those would not permit you to work at the warehouse. Unless it was a desk job.
PA Wilson

>>> ~^!"FORTUNA, ~^!MICHAEL RAY" <11027088@inmatemessage.com> 6/20/2019 2:08 PM >>>
To: Mrs Wilson
Inmate Work Assignment: mome

I need to find out if my medical problems will stop me from working at the main warehouse at the camp thank you

Stonewall Jackson Memorial Hospital Emergency Department
230 Hospital Plz, Weston, WV 26452
(304) 269-8000
Discharge Instructions (Patient)

Name: PRISONER, FORTUNA MICHAEL

Current Date: 08/17/19 16:33:46

DOB: 09/16/67

MRN: 310619

FIN: 1135786

Diagnosis: Contusion of head; Contusion of right hip; Contusion of right shoulder; Fall; Lumbar contusion

Visit Date: 08/17/19 15:25:00

Primary Care Provider:

Name: NonStaff, Physician

Phone:

Emergency Department Providers:

Primary Provider:

Loutsenhizer, Lindsey PA-C

Stonewall Jackson Memorial Hospital Emergency Department would like to thank you for allowing us to assist with your healthcare needs. The following instructions include patient education materials and information regarding your injury/illness.

Comment:

PRISONER, FORTUNA MICHAEL has been given the following list of follow-up instructions, prescriptions, and patient education materials:

Follow-up Instructions:

With:

Address:

When:

Physician NonStaff

Within 1 to 2 days

Comments:

Follow up with PCP next week

Rest

Ice to areas - 20 minutes at a time

Return to ED with new/worsening symptoms

Person Full Name PRISONER, FORTUNA
MICHAEL

MRN (Person Alias) 310619
08/17/2019 16:33:47

Date of Birth 09/16/67

FIN NBR (Encounter Alias) 1135786
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